PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

1483 (Touchstone) Attorney Docket Number **DECLARATION FOR UTILITY OR JOSEPH First Named Inventor DESIGN** COMPLETE IF KNOWN PATENT APPLICATION **Application Number** (37 CFR 1.63) Filing Date ■ Declaration ☑ Declaration Submitted after Initial OR Group Art Unit Submitted Filing (surcharge with Initial (37 ČFR 1.16 (e)) **Examiner Name** Filing required)

						
	As a below named inventor, I hereby declare that:					
	My residence, mailing address, and citizenship are as stated below next to my name.					
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
	COMPOSITE TOOLING					
	(Title of the Invention)					
	the specification of which					
	is attached hereto		as United Sta	ates Application N	lumber or PC	T International
	OR as United States Application Number or PCT International was filed on (MM/DD/YYYY) (if applicable)					
	(II applicable).					
	and was amended on (minutes)					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified (YES	Copy Attached? NO
						П
		US				
						R
<u> </u>		US	cumplemental priority da	ota sheet PTO/SP	/02B attache	d hereto:
L	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					
_	I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY)					
	Application Number(s)	Filing Dat	E (minisos () ()	numbers supplem	al provisional s are listed or ental priority /02B attache	na data sheet

[Page 1 of 2]

Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below							
Name	Name Auzville Jackson, Jr.						
Address	Address 8652 Rio Grande Rd.						
Address	Addross						
City	Richmond			State	VA	23229	
Country	US		Telephone 804/	740-6	828	804/740-1881	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
· · · · · ·	F SOLE OR FIRST			A petition	on has been file	ed for this unsigned inventor	
Given Name Brian E. Family Name Joseph				Joseph			
(first and middle [if any]) or surname Inventor's Signature Date 8/13/01				Date 8/13/01			
Residence: City Wheeling			State	wv ,	Country US	Citizenship	
	Mailing Address 18 Lynwood Avenue						
Mailing Ad							
City	Wheeling	State	WV	ZIP	26003	_{Country} US	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned in				ed for this unsigned inventor			
Given Name Darren Kenn			enneth	Family I		Rogers	
Inventor's Signature Date 8 13 0 1							
Residence	: City V	Vheeling	State	WV	Country US	Citizenship	
Mailing Address 4 America Avenue -					-		
Mailing Address							
City Wheeling State			WV	ZIP	26003	Country US	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

PTO/SB/81 (10-00)

Approved for use through 10/31/2002 OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	JOSEPH
Group Art Unit	
Examiner Name	
Attorney Docket Number	1483(Touchstone)

OR	ers at Customer Number er(s) named below: Name Auzville Jackson, Jr.	R	Place Customer Number Bar Code Label here Registration Number 17, 306			
as my/our attorn business in the	ey(s) or agent(s) to prosecute the application United States Patent and Trademark Office o	n identified	above, and to transact all herewith.			
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR						
Firm or	Firm or Auzville Jackson, Jr.					
Individual Na Address		8652 Rio Grande Rd.				
Address	, addition					
City	Richmond	State	VA Zip 23229			
Country		US				
Telephone	804/740-6828	Fax	804/740-1881			
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name Brian E. Joseph						
Signature	72 · 5 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
Date 8//3/01						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
forms if more than one s ✓ *Total of 2	signature is required, see below". forms are submitted.					
Utai Ol Z	ioffila are adminition.					

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number		
Filing Date		
First Named Inventor	JOSEPH	
Group Art Unit		
Examiner Name		
Attorney Docket Number	1483(Touchstone)	

OR	nt: ers at Customer Number er(s) named below: Name Auzville Jackson, Jr.	R	→ \ \		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.					
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR					
Firm or	Firm or Auzville Jackson, Jr.				
Individual Na	me				
Address	Address 8652 Rio Grande Rd.				
City	Richmond	State	VA	Zip 23229	
Country		US			
Telephone	804/740-6828	Fax	804/740-1881		
I am the: ✓ Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name	Darren Kenneth Rogers				
Signature					
Date					
NOTE: Signatures of all	the inventors or assignees of record of the entire inte	1	resentative(s)	are required. Submit multiple	
forms if more than one	signature is required, see below*.				
	forms are submitted.				